

GRANT AWARD APPROVAL FORM

1. OFFICIAL NAME OF GRANT PROGRAM:

Date of SBE Approval of Grant Criteria 11/14/2006

2008--2009 State School Aid Act Section 99(6)
(year) (year) (title)

Type: ☐ Initial ☐ Amendment ☒ Continuation

Legislation Authorizing This Grant Program: State Aid Act

☐ Federal Grant: CFDA Number _____ ☒ State Aid Grant: Section Number 99(6) ☐ Other (Private, Foundation)

2. SBE Priorities, Policies, and Programs that this Grant Supports (This information can be found on the SBE approved grant criteria form.):

Continue to advocate and promote high school reform, with an emphasis on relevance, relationships, and implementation.

3. Background/Purpose of Grant Program: The purpose of this grant is to provide support to regional Mathematics and Science Centers in preparing students for success with the Michigan Merit Curriculum.

Type of Grant Program: (check one)

- ☐ Competitive
☐ Formula
☒ Other: (specify below)

4. Target Population to be Served by Grant:

All science and mathematics teachers in grades 9-12.

5. Eligible Applicants:

All Intermediate School Districts

6. Award Information:

Amendment Date(s): _____

Amendment Amount(s): \$ _____

Total Recommended
Award to Date: \$1,000,000

Original Award Date:
10/01/08

\$ _____

Original Award Amount:
\$1,000,000

\$ _____

\$ _____

7. Program Office Responsible:

<u>Office</u>	<u>Unit</u>	<u>Contact</u>	<u>Phone</u>
Office of School Improvement	Curriculum and Literacy	Bill Welch	34223

This Form Was Prepared by: Carol Hebert

Phone Number: 34226

8. OFFICE	
Office Director Approval Signature: <u>Betty Underwood</u>	Date: <u>9-26-08</u>
Phone: _____ Comments: _____	
9. GRANTS OFFICE	
Grants Office Approval Signature: <u>May C. Chantel</u>	Date: <u>10-9-08</u>
Comments: _____	
<input type="checkbox"/> Exhibit A Not Required <input checked="" type="checkbox"/> Exhibit B Not Required	
10. DEPUTY SUPERINTENDENT	
Deputy Superintendent Approval Signature: <u>Sally Vane</u>	Date: <u>10-10-08</u>
Comments: _____	
11. SUPERINTENDENT	
Superintendent Approval Signature: <u>Mike</u>	Date: <u>10-13-08</u>
Comments: _____	

INSTRUCTIONS

- A. Complete items 1-8 on this form. The Grants Administration and Coordination Unit will facilitate completion of items 9-11.
- B. Attach three (3) sets of Exhibits A and B (one original and 2 copies). Do not staple the pink form nor the originals of Exhibits A and B.
 Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested and the amount Recommended to be funded.
 Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.
- C. Attach the grant award letters for the Superintendent's signature and the non-award letters for the Service Area Director's signature. The letters should be submitted in the same order given in Exhibit A and/or B. For each final Grant Award Notification letter, a Grant Award Notification form (yellow sheet) also needs to be submitted for the Superintendent's signature.
- D. Transmit Grant Award Approval Form (pink), attachments, and letters to the Grants Administration and Coordination Unit.

Note: This process takes, on average, two weeks from the time the packet with the Office Director's signature on it is delivered to the Grants Office, until the time the fully signed packet is routed to the person administering the grant program. This time varies depending upon the number of corrections that are necessary and the availability of all of the signers. It can take longer particularly around holiday times when the signers may be out of the office. Proofread and plan accordingly.

2008 – 2009 Section 99(6) Mathematics and Science Centers Grant
List of Projects Recommended for Funding

<u>Agency</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
Wayne RESA	\$1,000,000	\$1,000,000
Total		\$1,000,000